FORM D

OMB APPROVAL

UNITED STATES SECURITEES AND EXCHANGE COMMISSION Washington, D.C. S RECEIVED JUL 0 7 2003 FORM D NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3235-0076 Expires: December 31, 1993 Estimated average burden hours per form 16.00

SEC USE ONLY

Prefix

Serial

Date Received



| Name of offering ([] check if this is an amendment and name has changed, and indicate change.) |
|---|
| SOUTHEASTERN ENERGI-RIGH POINT PROSPECT, A RENTUCKI LIMITED PARTNERSHIP |
| Filing Under (Check box(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) []ULOE |
| Type of Filing: [] New Filing [] Amendment [X] Final |
| DUTHEASTERN ENERGY-HIGH POINT PROSPECT, A KENTUCKY LIMITED PARTNERSHIP Ling Under (Check box(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) []ULOE type of Filing: [] New Filing [] Amendment [X] Final A. BASIC IDENTIFICATION DATA A. BASIC IDENTIFICATION |
| |
| 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141 (Including Area Code) |
| Filing Under (Check box(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) []ULOE Type of Filing: [] New Filing [] Amendment [X] Final A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issument of Issuer: ([] check if this is an amendment and name has changed, and indicate change.) SOUTHEASTERN ENERGY-HIGH POINT PROSPECT, A KENTUCKY LIMITED PARTNERSHIP Address of Executive Offices (Number and Street, City, State, Zip Code) 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141 Address of Principal Business Operations (Number and Street, City, Sate, Zip Code) 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141 Brief Description of Business DRILLING OF TWO (2) OIL AND/OR GAS WELL Type of Business Organization [] corporation [] limited partnership, already formed [] Other (please specify): [] business trust [X] limited partnership to be formed Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: |
| DRILLING OF TWO (2) OIL AND/OR GAS WELL THOMSON |
| Type of Business Organization [] corporation [] limited partnership, already formed [] Other (please specify): |
| [] business trust [X] limited partnership to be formed |
| Actual or Estimated Date of Incorporation or Organization: 0 8 0 2 [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: |
| K Y |
| GENERAL INCORPLICATIONS |

Federal:
Who Must File: All issuers making an offering of securities in reliance eon an exemption under Regulation D or Section 4(6),
17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the addresse given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifty Street, NW, Washington, D.C. 20549 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. iformation Required: A new filing must contain all information requested. Amendments need only report the name of the issuers and fering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securiti states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice securities Administration in each state where sales are to be, or have been made. If a state requires, the payment of precondition to the claim for the exemption, a fee in the property amount shall accompany this form. This notice shall the appropriate states in accordance with the law. The Appendix to the notice constitutes a part of this notice of

Pailure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to predicated on the filing of federal notice. Will not result in a loss of available state exemption unless such exemption is

IDENTIFICATION

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized with the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10%

or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director [X]General and/or Managing Partners Full Name (Last name first, if individual) Southeastern Energy, Inc., program manager Business or Residence Address (Number and Street, City, State, Zip Code) 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141 Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Murrell, Alan G Business or Residence Address (Number and Street, City, State, Zip Code) Shirley Office Building, P. O. Box 591, Edmonton, Kentucky 42129 Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Smith, Doug Business or Residence Address (Number and Street, City, State, Zip Code) Shirley Office Building, P. O. Box 591, Edmonton, Kentucky Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partners Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

| В. | INFORMATION | ABOUT OFFERING | |
|----|-------------|----------------|--|
| | | | |

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? [x] Yes [] No

Answer also in Appendix, Column 2, if filing under ULOE.

- 2. What is the minimum investment that will be accepted from an individual? 1/4 unit \$4,375
- 3. Does the offering permit joint ownership of a single unit? [X] Yes [] No
- 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchaser in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

| (Check | "All Stat | es" or c | heck indi | ividual S | States) . | | | | | | [] | All States |
|--------|-----------|----------|-----------|-----------|-----------|------|------|------|------|------|------|------------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [TM] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [MA] | [WV] | [WI] | [WY] | [PR] |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

| (Check | "All Stat | es" or c | heck ind: | ividual S | States) . | | | | | | [] | All States |
|--------|-----------|----------|-----------|-----------|-----------|------|------|------|------|------|------|------------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(Check "All States" or check individual States)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

| | r | · · | | | | | • | F 3 | | | | |
|------|------|------|------|------|------|------|------|------|------|------|------|------|
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [TM] | [NE] | [NV] | [NH] | [NJ] | [MM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [AW] | [WV] | [WI] | [WY] | [PR] |

Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

. [] All States

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U | SE OF PROCEEDS | |
|-----|---|--|---|
| 0 " | ter the aggregate offering price of securities included in this offering and "if answer is "none" or "zero". If the transaction is an exchange offering, clumns below the amounts of the securities offered for exchange and already | the total amount check this box [] | already sold. Enter and indicate in the |
| | , | Aggregate | Amount Already |
| | Type of Security | Offering Price | |
| | Debt | \$ | \$ |
| | Equity | \$ | \$ |
| | [] Common [] Preferred | | |
| | Convertible Securities (including warrants) | \$ | \$ |
| | Partnership Interests | \$ | \$ |
| | Other (Specify) | \$2,100,000 | \$2,008,125 |
| | Total | \$2,100,000 | \$ <u>2,008,125</u> |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| | Enter the number of accredited and non-accredited investors who have purcand the aggregate dollar amounts of their purchases. For offerings under persons who have purchased securities and the aggregate dollar amount of tenter "0" if answer is "none" or "zero". | Rule 504, indic | ate the number of the total lines. Aggregate |
| | Accredited Investors | 44 | \$1,566,250 |
| | Non-accredited investors | | |
| | Total (for filings under Rule 504 only | | |
| | Answer also in Appendix, Column 4, if filing under ULOE | | • |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information sold by the issuer, to date, in offerings of the types indicated, in the first sale of securities in this offering. Classify securities by type of offering | e twelve (12) mor listed in Part C Type of | nths prior to the - Question 1. Dollar Amount |
| | Rule 505 | Security | Sold |
| | | | |
| | Rule 504 | · · · · · · · · · · · · · · · · · · · | |
| | Total | | • |
| 1. | a. Furnish a statement of all expenses in connection with the issuance and this offering. exclude amounts relating solely to organization expenses of be given as subject to future contingencies. If the amount of an expense estimate and check the box to the left of the estimate. | of the issuer. T | he information may |
| | Transfer Agent's Fees | | [] \$ |
| | Printing and Engraving Costs | | [] \$ |
| | Legal Fees | | [] \$ 5,000 |
| | Accounting Fees | | . [] \$ 500 |
| | Engineering Fees | | [] \$ <u>500</u> |
| | Sales Commissions (specify finders' fees separately) | | [] \$ 0 |
| | Other Expenses (identify) printing and miscellaneous | | |
| | Total | | \$ 10,000 |
| | 4 of 8 | | SEC 1972 (5/91) |

SEC 1972 (5/91)

| C OPERRING DOTOR NUMBER | R OF INVESTORS, EXPENSES AND USE OF PROCES | rne |
|--|--|--|
| 4. b. Enter the difference between the aggregatotal expense furnished in response to Paproceeds to the issuer." | ate offering price given in response to Part C - Question 4.a. This difference is | rt C - Question 1 and the "adjusted gross |
| 5. Indicate below the amount of the adjusted gr of the purposes shown. If the amount for any the left of the estimate. The total of the issuer set forth in response to part C - Que | y purpose is not known, furnish an estimate payments listed must equal the adjusted o | e and check the box to |
| | Payments | |
| | Öfficer: Directors Affiliat | & Payments to |
| Salaries and Fees | [] \$ | []\$ |
| Purchase of Real Estate | | []\$ |
| Purchase, rental or leasing & installat | ion of machinery & equipment [] \$ | []\$ |
| Construction or leasing of plat building | gs and facilities [] \$ | []\$ |
| Acquisition of other businesses (including involved in this offering that may be assets or securities of another issuer to be a securities of another issuer to be a security of a secur | ing the value of securities be used in exchange for the pursuant to a merger) [] \$ | []\$ |
| Repayment of Indebtedness | | []\$ |
| Working Capital | [] \$ | [] \$ |
| Other (Specify) Contract Drilli | ng and Completion []\$ 2,090,0 | 000 []\$ |
| | | |
| | []\$ | []\$ |
| | [] \$ <u>2,090,</u> | |
| Total Payments Listed (column totals ad | ded) [] | \$ 2,090,000 |
| 1 | D. FEDERAL SIGNATURE | |
| The issuer has duly caused this notice to be sifiled Under Rule 505, the following signature Securities and Exchange Commission, upon writte any non-accredited investor pursuant to paragra | constitutes an undertaking by the issue en request of its staff, the information i | r to furnish to the U.S. |
| Issuer (Print or Type) | Signature | ate |
| SOUTHEASTERN ENERGY-HIGH | 5//2 | 6/23/03 |
| POINT PROSPECT | | 4-905 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) PRESIDENT | |
| ALLEN MURRELL | | |

ATTENTION

International misstatement or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | _ | | | | _ |
|---|-----|----|----|-----|-------|---|
| F | STA | ጥር | ST | GNA | אקוות | |

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is flied, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULCE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) SOUTHEASTERN ENERGY-HIGH POINT PROSPECT | Signature Date 6/23/03 |
|--|---|
| Name of Signer (Print or Type) ALAN MURRELL | Title of Signer (Print or Type) PRESIDENT |

Instructions:

Print the names and title of the signing representative under his signature for the state portion of this form. Once copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signature.

APPENDIX

| 1 | | 2 | 3 | | 4 | | | 1 | 5 |
|-------|--------------------|--|--|--------------------------------------|--|--|--------|-----|----|
| 1 | Intersell to accre | nd to to non- dited stors t B- m 1) | Type of security and aggregate offered in state (Part C-Item 2) state (Part C-Item 2) state offered in state (Part C-Item 2) | | Disqual n unde ULOE (attention attention waiver | ification r state if yes, tach ation of granted) | | | |
| State | Yes | No | LIMITED PARTNERSHIP \$2,100,000 | Number of Accredited Investors | Amount | Number of Non- Accredited Investors | Amount | Yes | No |
| AL | | | | | | | | | |
| AK | х | | w. | 1 | 26,250 | | | | |
| AZ | | х | w. | 1 | \$8,750 | -0- | | | |
| AR | х | | " | 2 | \$70,000 | | | | |
| CA | х | | W | 8 | 175,000 | -4- | 70,000 | | |
| CO | | Х | " | 2 | 17,500 | -0- | | | |
| CT | | | | | | | | | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | Х | | " | 4 | 61,750 | 2 | 26,250 | | |
| GA | х | | W. | -0- | | 1 | 52,500 | | |
| HI | Х | | " | -1- | \$52,500 | | | | |
| ID | | | | | | | | | |
| IL | х | | " | 1 | 35,000 | 2 | 26,250 | | |
| IN | | Х | " | 2 | \$17,500 | -0- | | | |
| IA | x | | u | 1 | \$26,250 | -1- | 8,750 | | |
| KS | | | | | | | | | |
| KY | | | | | | | | | |
| LA | | | | | | | | | |
| ME | | | · · | | | | | | |
| MD | | | | | | | | | |
| AM | | х | n. | 1 | \$35,000 | -1- | 8,750 | | |
| MI | Х | | " | 2 | 227,500 | -0- | | | |
| MN | Х | | W | 2 | 52,500 | -1- | 8,750 | | |
| MS | | | | | | | | | |
| MO | | | | | | | | | |

APPENDIX

| 1 | : | 2 | 3 | | 5 | | | | | |
|-------|----------------------------------|------------------------------------|---|--------------------------------------|----------------------------|--|------------|--|----|--|
| | sell t accre inve: (Par | nd to o non- dited stors t B- n 1) | Type of security and aggregate offering price offered in state (Part C- Item 1) | Type of in | nvestor and am (Part C- | ount purchased Item 2) | d in state | Disqualification under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | LIMITED PARTNERSHIP \$2,100,000 | Number of Accredited Investors | Amount | Number of Non- Accredited Investors | Amount | Yes | No | |
| MT | | | | | | | | | | |
| NE | х | | W. | 2 | 17,500 | 1 | 35,000 | | | |
| NV | х | | n. | -0- | | 1 | 8,750 | | | |
| NH | | | | | | | | | | |
| NJ | Х | | W | -2- | 385,000 | 1 | 8,750 | | | |
| MM | х | | W | | | 1 | 8,750 | | | |
| NY | | х | W | 2 | 43,750 | -0- | | | | |
| NC | | х | W | 2 | \$43,750 | -0- | | | | |
| ND | | | | | | | | | | |
| ОН | | х | W | 2 | \$61,250 | -0- | | | | |
| OK | | | | | | | | | | |
| OR | | | | | | | | | | |
| PA | | | | | | | | | | |
| RI | | | | | | | | | | |
| sc | | ļ | | | | | | | | |
| SD | | | | | | | | | | |
| TN | | | | | | | | ļ | | |
| XT | | х | W | 3 | 78,750 | -3- | \$30,125 | <u> </u> | | |
| UT | Х | <u> </u> | " | 1 | 35,000 | | | | | |
| VT | | | | | | | | | | |
| VA | 1 | х | " | 1 | \$8,750 | -1- | 43,750 | | | |
| WA | <u> </u> | х | " | 3 | \$17,500 | -2- | 26,250 | | | |
| WV | | | | | | | | | | |
| WI | | Х | " | 2 | 35,000 | -0- | | | | |
| WY | <u> </u> | | | | | | | | | |
| PR | | | | | | | | | | |

Outside U.S. 6 \$87,500